

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.



PLAINTIFF

COURT CASE NUMBER

United States of America

05-1849 JH

DEFENDANT

TYPE OF PROCESS
DISTRICT COURT
DISTRICT OF NEW MEXICO
Release of Lis Pendens

Dana Jarvis, et al.

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

06 SEP 20 PM 2:58



ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

CLERK ALBUQUERQUE

2006 AUG 32 AM 7:02

RECEIVED
U.S. MARSHALS SERVICE
ALBUQUERQUE, NEW MEXICO

2006 SEP - 1 AM 7:03

RECEIVED
U.S. MARSHALS SERVICE
ALBUQUERQUE, NEW MEXICO

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Stephen R. Kotz
Assistant United States Attorney
P.O. Box 607
Albuquerque, NM 87103

Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, Telephone Numbers, and Estimated Times Available For Service)
Folio

1. Please file the attached the Release of Lis Pendens with the Sandoval County Assessors Office. Return completed copies for filing.

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

(505) 346-7274

DATE

8/30/06

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin
No.

District to Serve
No.

Signature of Authorized USMS Deputy or Clerk

Date

9/1/06

I hereby certify and return that ☒ I have personally served, ☐ I have legal evidence of service, ☐ I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (If not shown above)

A person of suitable age and dis-

☐ cretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of service

9/8/06

Time

am

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges (including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

REMARKS: